



CONTINUING PROFESSIONAL DEVELOPMENT (CPD) GUIDELINES

Malaysian Medical Council

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1.0 Introduction

Registered medical practitioners (RMPs) have an ethical responsibility to promote high standards of patient care, and therefore, must maintain and develop the knowledge and skills relevant to their profession. The Medical Regulations 2017 make it a legal requirement for doctors to provide evidence of participation in Continuing Professional Development (CPD) activities for the renewal of the Annual Practising Certificates (APC). Thus, CPD has become a compulsory requirement for the issuance of the APC. This guidance helps doctors to understand and meet the CPD requirements for the renewal of APC. It explains how doctors should develop and maintain their professional abilities, and improve their practice through CPD. The ultimate goal of the CPD programme is to reassure the public that RMPs regularly upgrade and maintain professional competence that would improve the safety and quality of patient care. RMPs seeking to renew their APC must comply with the minimum CPD requirements mandated by the Malaysian Medical Council (MMC).

2.0 The MMC-CPD Framework

A CPD framework provides a clear, structured approach to the management of the CPD activities. The development of the MMC- CPD framework was done through a consultative and collaborative process involving various stakeholders including the Ministry of Health (MOH), the Malaysian Medical Association (MMA), the Academy of Medicine of Malaysia (AMM) and the Academy of Family Practitioners of Malaysia (AFPM). Broadly, the CPD framework defines the various aspects of the MMC- CPD programme. The CPD framework enables medical practitioners to address areas that require improvement, explore new knowledge, skills and behaviour to maintain their competence throughout their career.

3.0 What is CPD?

- a. Continuing Professional Development (CPD) is a life-long learning process that helps to maintain and enhance the knowledge and skills, and attitudes of medical practitioners.
- b. CPD is any learning outside of undergraduate education or postgraduate training that helps to maintain and improve performance.
- c. CPD is inclusive of formal learning activities (e.g., attending seminars, lectures, courses, conferences, workshops) and informal learning relevant to the role and scope of practice (e.g., reflection on practice, reading journals, work-based learning, scholarly activities, journal clubs, self-directed learning).

4.0 Why is CPD important?

- a. With advances in knowledge and technology, the practice of medicine is rapidly evolving. The rising public expectations compel healthcare organizations and regulators to ensure healthcare practitioners are up-to-date and fit for practice throughout their careers.
- b. CPD, therefore, has become a professional imperative and an ethical responsibility of every doctor for improving the quality of health care.
- c. CPD helps doctors to respond to the changing needs of patients and health delivery systems by ensuring they have the appropriate knowledge, skills and attitude.
- d. CPD is an integral part of the process of improving the quality of healthcare that doctors deliver to society.

5.0 CPD requirements and obligations

- a. Malaysia joined the ranks of nations that practice mandatory CPD when the Medical Regulations 2017 came into force on 1st July 2017.
- b. The legislation makes it obligatory for medical practitioners to submit evidence of participation in CPD activities as a prerequisite for renewal of their APC.
- c. Section 28(1) and Section 28(2) of the Medical Regulations 2017 stipulate that:
 1. A fully registered medical practitioner who desires to practice as a medical practitioner shall apply to the Council for an APC in Form 14 and pay the fee as prescribed in the Second Schedule.
 2. An application under sub regulation (1) shall be accompanied by-
 - a. A Professional Indemnity Cover;
 - b. The evidence of sufficient continuing professional development points obtained as determined by the Council; and
 - c. Any other documents or certificates as determined by the Council.

6.0 What are CPD points?

- a. The CPD point system is a mechanism for recording participation in CPD based on the time or session spent on the educational activity.
- b. Normally, credits given are based on one credit equating to one hour of formal active educational activity (category A) or an equivalent measure of educational activity.
- c. For most informal other CPD activities, credit points are allocated per activity (scholarly activities -category C and professional activities- category E) or per session (work-based learning -category B and self-directed learning- category D).

7.0 What is a CPD Cycle?

- a. The CPD Cycle is a practical tool that helps RMPs to ensure their participation in CPD is effective by giving it an appropriate structure. The CPD cycle ensures that the learning RMPs undertake are appropriate for the CPD requirements.
- b. The key stages of a CPD Cycle include identifying the learning needs, methodical planning, carrying out learning activities, recording the activities, and finally reflecting on the outcomes of the learning.
- c. The MMC-CPD Cycle will run for 12 months.
- d. The collection of CPD points for the application of APC for a CPD Cycle shall start from 1st July to 30th June, e.g., CPD points for the application of APC for 2024 shall be from 1st July 2022 to 30th June 2023.

8.0 What is the minimum CPD requirement for renewal of APC?

- a. The minimum number of CPD points required for the renewal of the APC shall be twenty (20) CPD points.
- b. Although only 20 CPD points per CPD Cycle is required for the renewal of the APC, RMPs should take responsibility to undertake sufficient CPD to remain up to date and fit to practice.
- c. There is no maximum limit to the number of CPD points a RMP may obtain in the given CPD

Cycle.

- d. The quality and relevance of CPD activities matter more than the quantity of CPD points.
- e. Extra CPD points earned during the current CPD Cycle cannot be carried over to the ensuing CPD Cycle. The CPD system does not differentiate the specialist doctor from the non-specialist doctor. However, specialists should ensure that the CPD activities they select are tailored to their scope of practice, and support their professional development.

9.0 What activities are counted for CPD?

CPD includes all activities that RMPs undertake, to maintain, update, develop and enhance their knowledge, skills, and attitudes in response to the needs of their patients, as listed in the MMC-CPD Grading System (effective 1st July 2023).

- a. CPD is inclusive of formal learning activities (e.g., attending seminars, lectures, courses, conferences, workshops) and informal learning relevant to the role and scope of practice (e.g., reflection on practice, reading journals, work-based learning, scholarly activities, journal clubs, self-directed learning).
- b. Generally, any activity that helps RMPs to learn or develop professionally can be considered eligible for CPD, although RMPs should ensure that these are relevant for their practice and professional development as guided by the MMC-CPD Grading System.

10.0 What is the MMC-CPD Grading System?

- a. Although CPD belongs to the individual, there is a need for the organised collection of evidence of participation in educational activities.
- b. To ensure a standardised system of CPD point collection, the MMC-CPD committee in collaboration with the Ministry of Health (MOH), Malaysian Medical Association (MMA), and Academy of Medicine of Malaysia (AMM) had established the MMC-CPD Grading System.
- c. The MMC-CPD Grading System shows the range of CPD activities that RMPs may undertake and the credit points that are allocated for specific activities.
- d. The CPD activities are categorised into the following domains:
 - A. **Formal educational activities** Formal educational activities include participation in activities to update knowledge and skills, such as attending lectures, seminars, scientific meetings, conferences and skills training.
 - B. **Work-based learning activities** is professional development that takes place within the work environment in the medical practitioner's current role. Work-based learning includes learning activities and development opportunities including such as journal club meetings, audit/morbidity/mortality meetings, interdepartmental meetings, grand ward rounds.
 - C. **Scholarly activities** is work that enhances educational development and includes, discovery of new knowledge and technology, dissemination of knowledge, supervision of training and participation in assessments.
 - D. **Self-directed learning** takes place when the individual takes the initiative in diagnosing learning needs, formulating learning goals, designing learning experiences, identifying and using available resources, and evaluating learning outcomes. Self-directed learning includes, reading books, journals, and articles of a general nature, listening to podcasts and completing online learning modules.
 - E. **Professional activities** involve participation in activities that apply scientific expertise for the benefit of the wider community and activities that support professional development such as participating in the activities of a professional bodies, and learned societies, leadership role in medical societies/NGOs, serving in

national, state and institutional level committees (Institutional level committees are committees that represent the institution at the hospital/university or faculty level). and participation in self-development programmes such as leadership, management, communication skills training programmes.

11.0 Planning for the CPD Cycle

- a. This guidance does not dictate what CPD, or how much CPD is right for any particular RMP. RMPs must take responsibility for their own learning and professional development.
- b. It is recommended that RMPs ensure their participation in CPD is effective for their learning needs by going through the following stages; identifying educational needs, methodical planning on how and when to carry out the activities, carrying out the CPD activities, recording the activities, and finally reflecting on the outcomes of learning.
- c. The learning needs must anticipate and respond to the expectations of patients and the evolving healthcare service.
- d. Planning ahead is essential (instead of participating in activities ad hoc) to ensure that the activities undertaken meet the specific educational needs.
- e. The CPD activities undertaken must cover the whole of the RMP's practice, must be tailored to their scope of practice and support their professional development.

12.0 How to ensure that CPD is effective?

- a. CPD is not about merely attending courses and collecting CPD points; it is about continuing professional learning in whatever way that helps to maintain competence and improve the professional service provided.
- b. RMPs should identify and undertake CPD activities that help to maintain and improve the standards of their own practice and those teams in which they work.
- c. RMPs must undertake a range of CPD activities that will have an effect across the whole of their professional practice. This includes both the clinical and the non- clinical aspects of practice, including any management, research, and teaching responsibilities that they may have.
- d. RMPs must maintain a continuous, up to date, accurate and reflective record of the CPD activities undertaken and be able to provide supporting evidence if requested. It is important to recognise that learning should not be episodic, and CPD should be a life-long learning process.
- e. RMPs must seek to ensure that their CPD activities have benefited the quality of their practice and they must reflect upon this.
- f. It is important to recognise that there is no single approach to CPD. What to learn and how to learn will depend on RMPs' preference and the opportunities available to them.

13.0 Recording and monitoring CPD activities

- a. RMPs are required to show evidence that they have acquired sufficient CPD points for the renewal of their APC. There must be documented evidence such as certificate of attendance, letter of attestation, synopsis (for self-study activities).
- b. MMC has formally appointed MyCPD (MOH), MMA and AMM as 'Administrators of CPD point collection system'.
- c. Administrators of CPD point collection systems have provided recording platforms, which are available as a web portal or as a mobile application. These systems allow RMPs to record, monitor and reflect on their professional development.
- d. RMPs may choose to use any one of the CPD point collection systems (MMA, MOH or AMM system) that have been approved by the Council to record and monitor their CPD

- points.
- e. RMPs shall take responsibility for the recording and monitoring of their own CPD activities.
- f. They maintain a record of their participation in the CPD activities undertaken in their chosen CPD point collection system.
- g. The CPD record should accurately reflect the CPD activities undertaken.
- h. RMPs may use the following links to seek a step-by-step guide to record their CPD:
 - i. MyCPD system <https://www.mycpd2.moh.gov.my/>
 - ii. MMA CPD System <https://mma.org.my/mma-cpd/>
 - iii. AMM Medical Specialist CPD system <http://cpd.specialist.org.my/>

14.0 Submission of CPD record for renewal of APC

- a. The CPD point collection systems of MyCPD, MMA and AMM are electronically linked with the Medical Register Information and Technical System (MeRITS) of the MMC.
- b. The MMC is linked to each of the CPD Administrators through the MeRITS. Therefore, upon application for the APC, the CPD points that have been verified and approved by the chosen CPD Administrator will be reflected in MeRITS.

15.0 Audit of CPD points

- a. While the CPD system is based on trust, the CPD points submitted for consideration of APC may be audited.
- b. The purpose of the audit exercise is to ensure that the total CPD points submitted for renewal of APC meets the mandatory requirement.
- c. RMPs who are selected randomly for audit of their CPD data shall be notified and requested to submit documents to support their CPD activities.

16.0 Criteria of CPD Points reduction

- a. RMPs who are no longer involved in clinical practice or related professional activities do not require APC, therefore do not require CPD.
- b. There are five (5) criteria for CPD Point reduction which are:
 - i. Medical Practitioners who have not been registered before and obtain Full Registration for the first time with the MMC or upon recommendation from JKP1 and endorsed by MMC, will be allowed reduction of CPD points to zero (0) for application of APC for the year the Full Registration is obtained and the subsequent year.
 - ii. A serious illness that requires prolonged medical treatment and prevents a registered medical practitioner from participating in CPD activities either for a continuous period of 3 months or more, or cumulatively over a period of 3 months or more in a CPD points cycle.
 - iii. Personal hardship, including caring for close family members, career issues and other issues.
 - iv. Maternity leave in which the registered medical practitioner is on leave for 3 months or more in a CPD Cycle.
 - v. A medical practitioner who has not practised medicine for one (1) year or more for certain personal reasons.
- c. All applications shall be supported by appropriate documentation.
- d. The MMC-CPD Committee shall review the application on a case-by-case basis and make appropriate recommendations to the Council. All decisions are subject to the discretion of Malaysian Medical Council.

17.0 Insufficient CPD points

- a. RMPs with insufficient CPD points recorded in the CPD point collection system can request for additional CPD points. The applicants must submit evidence of participation in CPD activities to the MMC-CPD committee. The MMC-CPD Committee shall review the applications on a case-by-case basis and make appropriate recommendations to the Council.

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